TRS Office Use Only

MONTANA TEACHERS' RETIREMENT SYSTEM

1500 E 6TH AVE PO BOX 200139 HELENA MT 59620-0139 406 444-3134

APPLICATION FOR ELECTRONIC DEPOSIT

PAYEE INFORMATION (please type or print legibly in dark ink): See instructions on reverse side	
Name	Social Security Number
Home Mailing Address	Change in Home Mailing Address?
	☐ YES ☐ NO
City, State & Zip Code	Area Code & Telephone Number
AUTHORIZATION	
I hereby authorize the Teachers' Retirement System (TRS) to initiate credit entries of my monthly payment to my account in the financial institution named below, and if necessary, debit entries and adjustments for credit entries in error to my account.	
the linancial institution named below, and it necessary, debit en	tries and adjustments for credit entries in error to my account.
(Signature)	(Date)
FINANCIAL INSTITUTION INFORMATION	
NOTE-THE TRS CANNOT MAKE ELECTRONIC DEPOSITS TO BANKS OUTSIDE OF THE U.S.	
Name of Financial Institution	Name of Joint Bank Account Holder
Mailing Address	Home Mailing Address
City, State, Zip Code	City, State, Zip Code
Area Code & Telephone Number of Financial Institution	Area Code & Telephone Number
Account Number	Type of Account (Check only one option.)
	☐ Checking ☐ Savings

INVALID UNLESS VOIDED CHECK ATTACHED HERE (DO NOT STAPLE)

TRS FORM 114 REV 01/06

PLEASE READ CAREFULLY

The TRS is pleased to be able to offer you the convenience of electronic deposit of your monthly benefit. Monthly benefits are payable on the last day of each month. Under this method of deposit, your benefit will be electronically deposited into your bank account and posted on the last business day of each month.

All requested information on the front of this form must be completed in order for the TRS to initiate an electronic deposit on your behalf.

Routing Number – Your financial institution's routing number is printed in the bottom left hand portion of your personal checks (the first nine digits).

Account Number – Your account number is printed on the bottom of your checks following the routing number. It may be the series of numbers followed by your check number, or it may be the series of digits after your check number. NOTE: The check number is **not** part of the account number.

The number of figures in an account varies from financial institution to financial institution. If you are unsure of which numbers reflect which information on your checks, please contact your financial institution for assistance. You must attach a voided personal check to the front of this form. This will aid the TRS in verifying your routing and account numbers.

Your first payment will be deposited into your account within 30 to 60 days after this authorization is received by the TRS. This includes a transfer from one financial institution to a new financial institution, or a change in account type or account number. DO NOT CLOSE YOUR OLD ACCOUNT UNTIL YOUR FIRST PAYMENT HAS BEEN DEPOSITED INTO YOUR NEW ACCOUNT.

The first month your benefit is electronically deposited, a check stub will be mailed to your home mailing address on file with the TRS. The check stub will advise you of the amount of the deposit. In addition, the check stub will also reflect your gross monthly benefit (Base Amount + Post Retirement Adjustments + Guaranteed Annual Benefit Adjustments), along with any deductions being withheld such as FIT (federal income taxes), SIT (Montana state income taxes) or an insurance premium. Following your initial electronic deposit, check stubs will **only** be mailed when your net monthly deposit amount changes.

SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS

Joint account holders should immediately advise both the TRS and the financial institution of the death of Funds deposited after the date of death or eligibility must be returned to the TRS. A determination regarding any death benefits payable will be made by the TRS.

CHANGING ACCOUNTS AND/OR FINANCIAL INSTITUTIONS

In order to implement a change in electronic deposit, a new form must be completed, or adequate written documentation must be submitted to the TRS to affect a change. The form to change your electronic deposit can be obtained by contacting the TRS at 406 444-3185, or by visiting the TRS website at http://www.trs.mt.gov.

CANCELLATION

Your electronic deposit will continue to be deposited into your designated bank account until you notify the TRS, in writing, that you wish to change your account and/or financial institution, or upon the notification of your death.

If you have any questions regarding the above, please call the TRS at 406 444-3185.